

Testimony of David W. Catoe – Atrium Health

Good Morning. I want to thank this committee for the opportunity to speak on behalf of Atrium Health system, formerly known as Carolinas Healthcare System. Atrium Health has always had an outstanding relationship with our Veterans in all communities we serve and we consider it a privilege to provide medical care to them. In fact, our health system has been recognized numerous times for supporting military personnel and Veterans through awards such as the Secretary of Defense Freedom Award, the Secretary of Defense Patriot Award, and being a Top 10 Military Friendly Employer. As we work to further support our Military Veterans, I would like to take a few minutes to highlight some of the issues Atrium Health is working to overcome in coordinating claims administration with the VA programs.

1. **Medical Records** – Atrium Health often submits hard copy medical records multiple times to the VA for the same patient encounter because the VA is unable to locate and match up the records with the claims. This not only places a burden on the hospitals administratively, it also presents potential HIPAA/Privacy concerns since the VA appears to be unable to account for all the medical records that it has received from Atrium Health. Since VA will not pay a claim without the medical records – hospitals have no option but to continue sending records when requested time after time again. Our other commercial payers have payer portals through which we can upload medical records and other required documents directly to the payer for attachment to the claim – avoiding the printing and mailing of sensitive medical record information. VA should implement a HIPAA-compliant system for the electronic transfer of medical records and other documents needed for payment, similar to other payers who adjudicate claims.
2. **Authorizations** - When Veterans present for medical care at Atrium Health, we treat them as our first priority – regardless of the administrative workings going on in the background. Most Veterans don't know the authorization number when they present and we often must obtain the number after the fact. Because there is both a clinical and claims component in the authorization process, there are handoffs occurring which often leads to trouble during claims administration. For example, VA faxes authorizations to a fax number in Clinical Case Management (CCM) at our hospital. This can be problematic to ensure that number also appears on the claim form days or weeks later. VA Choice often cannot provide us the authorization number when we call for it. Without this authorization, the claim will not be paid. It would be much more efficient and convenient for everyone if the VA could establish a portal so that authorizations could be pulled by the provider electronically and added to the claim as needed. This would eliminate unnecessary calls to the VA for the authorization number and improve the service provided to the Veteran.
3. **Excessive Hold Times** – Atrium Health claims specialists experience excessive hold times when calling into the claims center to check on the status of claims. It is not uncommon to be on hold from 30 minutes to three hours before reaching a VA or VA Choice claims representative. For VA Choice claims, we are only allowed to ask about three claims at a time before having to call back and go through the entire waiting process again to follow-up on additional claims. This is

extremely problematic when we have thousands of outstanding claims with the VA and VA Choice at any point in time. We have also had to leave phone messages and emails with provider relations in the past since we could not contact a live person – but rarely do we ever receive a reply. The claims specialists at Atrium Health who work VA claims are often frustrated and demoralized due to the stress encountered as their productivity is hard to achieve when spending so much time waiting for assistance. More VA claims representatives are needed to handle the volume of calls received to avoid these excessive wait times for assistance.

4. Education - VA needs to provide better education to the providers as well as the Veterans in explaining the different programs available for their care and the requirements for each program. Currently, these programs are very confusing to even an experienced VA claims specialist. I cannot imagine the confusion that many Veterans experience in trying to coordinate their care with VA. For example, many Veterans believe VA acts like an insurance policy when it in fact does not. An excellent example is the Other Health Insurance (OHI) amended regulation dated January 9th, 2018 wherein VA advised that providers should bill any available health insurance before VA and VA would be secondary to OHI for emergency services. However, VA is an entitlement and not an insurance program, thus they do not pay deductibles, co-insurance, or co-payments incurred by billing the OHI. Veterans still believe the hospital has the option to bill VA over OHI and we are at fault when the Veteran has a \$1,000 plus deductible to meet – stating we should have billed VA first. The more communication and awareness there is on how these various programs work, the less confusion and more efficient processes we can have in place to serve our Veterans.

Again, thank you for allowing me the privilege to discuss some of the opportunities our health system believes can improve our Veterans' experience as we provide medical care and the subsequent filing of claims with VA, VA Choice, and ChampVA. We are pleased to work with you and the VA to make the claims process more streamlined, efficient and friendlier to our Veterans.